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UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))</small>		<i>Attorney Docket No.</i> 706815US1
		<i>First Inventor or Application Identifier</i> Darrin W Hurley
		<i>Title</i> Evaporative Emission System Integrity Module
		<i>Express Mail Label No.</i> EV026312371US as deposited on: 11/12/03
APPLICATION ELEMENTS <small>See MPEP Chapter 600 concerning utility patent application contents.</small>		ADDRESS TO: MS Patent Application Commissioner for Patents PO Box 1450 Alexandria, VA 22313-1450

1. *Fee Transmittal Form (e.g. PTO/SB/17)
(Submit an original and a duplicate for fee processing)
2. Specification [Total Pages 11] (preferred arrangement set forth below)
 - Descriptive title of the Invention
 - Cross References to Related Applications
 - Statement Regarding Fed Sponsored R&D
 - Reference to Microfiche Appendix
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings (if filed)
 - Detailed Description
 - Claims(s)
 - Abstract of the Disclosure
3. Drawing(s) (35 U.S.C. 113) [Total Sheets 4]
4. Oath or Declaration [Total Pages 2]
 - a. Newly executed (original or copy)
 - b. Copy from a prior application (37 C.F.R. § 1.63 (d)) (for continuation/divisional with Box 16 completed)
 - i. DELETION OF INVENTOR(S)
Signed statement attached deleting inventor(s)
Named in the prior application, see 37 C.F.R.
§ 1.63(d)(2) and 1.33 (b).

***NOTE FOR ITEMS 1 & 13: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28).**

16. If a **CONTINUING APPLICATION**, Check appropriate box, and supply the requisite information below and in a preliminary amendment:
 Continuation Divisional Continuation-in-part (CIP) of prior application No. _____

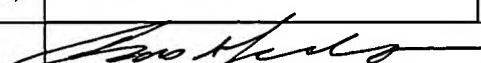
Prior application information: Examiner _____

FOR CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

17. CORRESPONDENCE ADDRESS

Customer Number or Bar Code Label **24938** or Correspondence address below
(Insert Customer No. or Attach bar code label here)

Name	Thomas A Jurecko DaimlerChrysler Intellectual Capital Corporation				
Address	CIMS 483-02-19 800 Chrysler Drive				
City	Auburn Hills	State	Michigan	Zip Code	48326-2757
Country	United States	Telephone	944-6525	Fax	(248) 944-6537

Name (Print or Type)	Thomas A Jurecko	Registration No.	48,392
Signature		Date	11.12.2003

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, D.C. 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, D.C. 20231.

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10/7/06134



11/12/03



24938

PATENT & TRADEMARK OFFICE

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FEE TRANSMITTAL

For FY 2001

Patent fees are subject to annual revision.

Small Entity payments must be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12.

TOTAL AMOUNT OF PAYMENT (\$)

770

Complete if Known

Application Number

Filing Date

First Named Inventor

Darrin W Hurley

Examiner Name

Group / Art Unit

Attorney Docket No.

70681SUS1

METHOD OF PAYMENT (check one)

- The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account Number

03-1800

Deposit Account Name

DaimlerChrysler Intellectual Capital Corporation

- Charge Any Additional Fee Required Under
37 CFR 1.16 and 1.17

2. Payment Enclosed: Check Money Order Other

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Fee Code	Small Entity Fee Code	Fee (\$)	Fee (\$)	Fee Description	Fee Paid
105	130	205	65	Surcharge-late filing fee or oath	
127	50	227	25	Surcharge-late provisional filing fee or cover sheet	
139	130	139	130	Non-English specification	
147	2,520	147	2,520	For filing a request for examination	
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
115	110	215	55	Extension for reply within first month	
116	390	216	195	Extension for reply within second month	
117	890	217	445	Extension for reply within third month	
118	1,390	218	695	Extension for reply within fourth month	
128	1,890	228	945	Extension for reply within fifth month	
119	310	219	155	Notice of Appeal	
120	310	220	155	Filing a brief in support of an appeal	
121	270	221	135	Request for oral hearing	
138	1,510	138	1,510	Petition to institute a public use proceeding	
140	110	240	55	Petition to revive – unavoidable	
141	1,240	241	620	Petition to revive – unintentional	
142	1,240	242	620	Utility issue fee (or reissue)	
143	440	243	220	Design issue fee	
144	600	244	300	Plant issue fee	
122	130	122	130	Petitions to the Commissioner	
123	50	123	50	Petitions related to provisional applications	
126	180	126	180	Submission of Information Discl. Stmt.	
581	40	581	40	Recording of each patent assignment per property (times number of properties)	
146	710	246	355	Filing a submission after final rejection (37 CFR 1.129(a))	
149	710	249	355	For each additional invention to be examined (34 CFR 1.129(b))	

2. EXTRA CLAIM FEES

Total Claims	Extra Claim	Fee from below	Fee Paid
10	-20** =	0 X 0 =	0
1	- 3** =	0 X 0 =	0
Multiple Dependent		0 =	0

*# or number previously paid, if greater; For Reissues, see below

Large Entity Fee Code	Small Entity Fee Code	Entity Fee (\$)	Entity Fee (\$)	Fee Description
1202	18	2202	9	Claims in excess of 20
1201	86	2201	43	Independent claims in excess of 3
1203	290	2203	145	Multiple dependent claim, if not paid
1204	86	2204	43	** Reissue independent claims over original patent
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent
SUBTOTAL (2) (\$ 0)				

SUBMITTED BY

Typed or Printed Name

Thomas A Jurecko

Signature

Complete (if applicable)

Reg. Number 48,392

Date

11.12.2003

Deposit Account User ID